

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00563064</div>	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y 09 / 20 / 2014</div>	

Full Name of Payee Marcie Finney		Date of Public Distribution/Dissemination <div style="display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014</div>	
Mailing Address 2508 College Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">571.43</div>	
City Fort Worth	State TX	Zip Code 76110	Transaction ID : SE.4711
Purpose of Expenditure Services for Printing and Design of Door Hanger		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014</div>
Name of Federal Candidate THOM R TILLIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">77422.06</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee Office Depot		Date of Public Distribution/Dissemination <div style="display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2014</div>	
Mailing Address 6600 N Military Trail		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1298.66</div>	
City Boca Raton	State FL	Zip Code 33496	Transaction ID : SE.5043
Purpose of Expenditure Supplies for Phone Centers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014</div>
Name of Federal Candidate THOM R TILLIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">78720.72</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1870.09</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2014

Signature

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 PAGE 2 OF 3
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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y 09 / 20 / 2014</div>	

Full Name of Payee Pressman Printing Inc		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014	
Mailing Address 8308 Clifford St		Amount 4532.66	
City Fort Worth	State TX	Zip Code 76108	Transaction ID : SE.4712
Purpose of Expenditure Printing and Shipping for Door Hangers	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014	
Name of Federal Candidate THOM R TILLIS		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
		83253.38	

Full Name of Payee Strategic Media 21		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2014	
Mailing Address 560 S. Winchester Blvd Ste 500		Amount 2858.00	
City San Jose	State CA	Zip Code 95128	Transaction ID : SE.5044
Purpose of Expenditure Advertising Services and Production	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2014	
Name of Federal Candidate THOM R TILLIS		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
		86111.38	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7390.66
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mr. KENNETH W. DAVIS JR.

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 09 / 20 / 2014	

Full Name of Payee Strategic Media 21		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014	
Mailing Address 560 S. Winchester Blvd Ste 500		Amount 12500.00	
City San Jose	State CA	Zip Code 95128	Transaction ID : SE.5046
Purpose of Expenditure Advertising Services and Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014
Name of Federal Candidate THOM R TILLIS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		98611.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	21760.75

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Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Date

MM / DD / YYYY
09 / 20 / 2014

Signature